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Bib Data Sheet

CONFIRMATION NO. 8404

<b>SERIAL NUMBER</b> 10/697,675	<b>FILING OR 371(c) DATE</b> 10/29/2003 <b>RULE</b>	<b>CLASS</b> 235	<b>GROUP ART UNIT</b> 2876	<b>ATTORNEY DOCKET NO.</b> 20005/10001
<b>APPLICANTS</b> Alison D. Wilson, Woodridge, IL;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/423,909 11/05/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> ** 01/28/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged		<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 19
Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>INDEPENDENT CLAIMS</b> 4		
<b>ADDRESS</b> 34431				
<b>TITLE</b> Methods and apparatus to monitor the inventory of a food storage unit				
<b>FILING FEE RECEIVED</b> 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	